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APPLICANTS

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** CONTINUING DATA ***** *ny (no)*

** FOREIGN APPLICATIONS ***** *ny (no)*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>ny</i>	Initials <i>ny</i>		

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TITLE
 BUFFERED OVERSAMPLING ANALOG-TO-DIGITAL CONVERTER WITH IMPROVED DC OFFSET
 PERFORMANCE

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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